# Missouri

# UNIFORM APPLICATION FY 2021 Mental Health Block Grant Report COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANT

OMB - Approved 04/19/2019 - Expires 04/30/2022 (generated on 12/07/2020 2.20.11 PM)

Center for Mental Health Services
Division of State and Community Systems Development

### A. State Information

### **State Information**

### **State DUNS Number**

Number 780871430

**Expiration Date** 

### I. State Agency to be the Grantee for the Block Grant

Agency Name Missouri Department of Mental Health

Organizational Unit Division of Behavioral Health

Mailing Address P.O. Box 687

City Jefferson City

Zip Code 65102-0687

### II. Contact Person for the Grantee of the Block Grant

First Name Mark

Last Name Stringer

Agency Name Missouri Department of Mental Health

Mailing Address P.O. Box 687

City Jefferson City

Zip Code 65101-0687

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Fax

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### III. State Expenditure Period (Most recent State exependiture period that is closed out)

From 7/1/2019

To 6/30/2020

### **IV. Date Submitted**

NOTE: This field will be automatically populated when the application is submitted.

Submission Date 11/24/2020 9:33:20 AM

Revision Date 11/24/2020 9:33:31 AM

### V. Contact Person Responsible for Report Submission

First Name Jason

Last Name Jones

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### **Footnotes:**

### **B. Implementation Report**

### MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: **Priority Area:** Coordination of Primary Care and Behavioral Health Services **Priority Type:** SAT, MHS Population(s): SMI, SED Goal of the priority area: Coordinate consumers' primary and behavioral healthcare in order to improve consumer health and reduce medical costs. Strategies to attain the goal: 1) Continue to coordinate preventative and preventive and primary care for Health Home participants 2) Continue outreach to Medicaid-enrolled adults who 1) have a substance use disorder or serious mental illness, 2) have high annual healthcare costs, and 3) are not currently enrolled in behavioral health treatment 3) Contract with the Missouri Institute for Mental Health for ongoing evaluation of Missouri's Health Home programs. -Annual Performance Indicators to measure goal success-Indicator #: Indicator: Number of participants in Health Homes per fiscal year **Baseline Measurement:** 31,616 First-year target/outcome measurement: 31,000 Second-year target/outcome measurement: 31,000 New Second-year target/outcome measurement(if needed): **Data Source:** Missouri Medicaid Claims New Data Source(if needed): **Description of Data:** The number of Health Home participants is determined from a Per member Per Month (PMPM) data file submitted to DMH from the Missouri Medicaid agency, MO HealthNet, on a monthly basis. These are individuals who participated at any time during the specified fiscal year. New Description of Data:(if needed) Data issues/caveats that affect outcome measures: None New Data issues/caveats that affect outcome measures: Report of Progress Toward Goal Attainment Achieved Not Achieved (if not achieved, explain why) First Year Target:

The number of participants in Health Home for FY 2020 is 31,976.

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How first year target was achieved (optional):

Reason why target was not achieved, and changes proposed to meet target:

ndicator #:	2
ndicator:	Number of participants in DM 3700 per fiscal year
Saseline Measurement:	6,189
irst-year target/outcome measurement:	5,000
econd-year target/outcome measurement:	5,000
New Second-year target/outcome measuren	nent(if needed):
Data Source:	
DMH information system	
New Data Source(if needed):	
Description of Data:	
A participant in DM 3700 is defined as a corepisode of care during the specified fiscal y	nsumer who is listed on the master list of DM 3700 participants and has an open CPS or ADA rear.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	asures:
None	
New Data issues/caveats that affect outcom	
Reason why target was not achieved, and ch How first year target was achieved (optional) The number of participants in DM 3700 in F	D:
' '	· · · · · · · · · · · · · · · · · · ·
ndicator #:	3
ndicator:	Number of participants in ADA Disease Management per fiscal year
Saseline Measurement:	750
irst-year target/outcome measurement:	1300
econd-year target/outcome measurement:	1300
New Second-year target/outcome measuren	nent(if needed):
Data Source:	
DMH information system	
New Data Source(if needed):	
Description of Data:	
A participant in ADA Disease Management	is defined as a consumer who is listed on the master list of ADA Disease Management pisode of care during the specified fiscal year.
A participant in ADA Disease Management	

Report of Progres	s Toward Goal Attainm	ent
First Year Target:	Achieved	Not Achieved (if not achieved,explain why)

**Priority Area:** Crisis Intervention

Priority Type: SAT, MHS
Population(s): SMI, SED

### Goal of the priority area:

Promote safety and emotional stability, minimize further deterioration in mental state, increase access to treatment and support services, and improve individual outcomes for individuals in behavioral health crisis; better utilize limited criminal justice and healthcare resources by linking individuals in need of behavioral healthcare services with those services.

### Strategies to attain the goal:

- 1) Identify and address structural barriers, miscommunications, and consistent patters that reduce access to behavioral healthcare services.
- 2) Provide behavioral health expertise to law enforcement, court personnel, and primary healthcare staff in order to more effectively respond to behavioral health crises.
- 3) Advocate for and engage individuals in crisis in behavioral health treatment and support services.
- 4) Provide immediate person-centered interventions to individuals in behavioral health crisis and facilitate timely access to services and supports.

# -Annual Performance Indicators to measure goal success-Indicator #: Indicator: Number of referrals to the CMHLs per fiscal year **Baseline Measurement:** 10,250 9,000 First-year target/outcome measurement: Second-year target/outcome measurement: 9,000 New Second-year target/outcome measurement(if needed): **Data Source:** Missouri Coalition for Community Behavioral Healthcare New Data Source(if needed): **Description of Data:** Number of CMHL contacts are tracked by the Missouri Coalition for Community Behavioral Healthcare New Description of Data:(if needed) Data issues/caveats that affect outcome measures: An Individual may account for more than one contact.

New Data issues/caveats that affect outcome measures:

Reason why target was not achieved, and changes proposed to meet target:  How first year target was achieved (optional):  The number of referrals to the CMHLS in FY 2020 is 10.472.  Indicator #:  2 Indicator #:  1,837 First-year target/outcome measurement: 1,500 New Second-year target/outcome measurement/if needed): Data Source:  Missouri Coalition for Community Behavioral Healthcare New Data Source(if needed):  Description of Data: Number of served in the ERE project is tracked and reported by the Missouri Coalition for Community Behavioral Healthcare. New Description of Data: Number of served in the ERE project is tracked and reported by the Missouri Coalition for Community Behavioral Healthcare. New Description of Data: New Data issues/caveats that affect outcome measures: none  New Data issues/caveats that affect outcome measures: How first year target was achieved (optional): The number served in the ERE project in FY 2020 is 2,029.  Indicator:  1,301 Rindicator: Number of new law enforcement officers trained in CIT per fiscal year Baseline Measurement: 1,301 Rindicator: 1,301 Rindi	First Year Target:	red Not Achieved (if not achieved,explain why)
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New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment First Year Target: Achieved Not Achieved (if not achieved,explain why) Reason why target was not achieved, and changes proposed to meet target:  How first year target was achieved (optional): The number of law enforcement officers trained in CIT in FY 2020 is 1,217.  Indicator: Number of ACI calls per fiscal year Reason why target was achieved (optional): The number of aw enforcement officers trained in CIT in FY 2020 is 1,217.  Indicator: Number of ACI calls per fiscal year Reason why target/outcome measurement: 75,000 Reasond-year target/outcome measurement: 75,000 Reasond-year target/outcome measurement: 75,000 Rew Second-year target/outcome measurement(if needed): Data Source: Contracted Provider Reporting Rew Data Source(if needed):  Description of Data: Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data: Indicator: Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data: Report of Progress Toward Goal Attainment Report of Progress Toward Goal Attainment Restrict Year Target: Achieved Not Achieved (if not achieved explain why)		
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Report of Progress Toward Goal Attainment  First Year Target:  Achieved Not Achieved (if not achieved,explain why)  Reason why target was not achieved, and changes proposed to meet target:  How first year target was achieved (optional):  The number of law enforcement officers trained in CIT in FY 2020 is 1,217.  Indicator #:  4 Indicator:  Number of ACI calls per fiscal year  Baseline Measurement:  73,468  First-year target/outcome measurement:  75,000  Second-year target/outcome measurement:  75,000  New Second-year target/outcome measurement(if needed):  Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:  New Description of Data:  New Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target:  Achieved (if not achieved,explain why)	Data issues/caveats that affect outcome mea	asures:
Report of Progress Toward Goal Attainment  First Year Target:  Achieved  Not Achieved (if not achieved explain why)  Reason why target was not achieved, and changes proposed to meet target:  How first year target was achieved (optional):  The number of law enforcement officers trained in CIT in FY 2020 is 1,217.  Indicator #:  4  Indicator #:  4  Indicator:  Number of ACI calls per fiscal year  Baseline Measurement:  73,468  First-year target/outcome measurement:  75,000  New Second-year target/outcome measurement:  75,000  New Second-year target/outcome measurement(if needed):  Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data: (If needed)  Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target:  Achieved  Not Achieved (if not achieved explain why)	None	
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Reason why target was not achieved, and changes proposed to meet target:  How first year target was achieved (optional):  The number of law enforcement officers trained in CIT in FY 2020 is 1,217.  Indicator #:  4  Indicator:  Number of ACI calls per fiscal year  73,468  First-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: 75,000  New Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:(If needed)  Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target:    Not Achieved (if not achieved,explain why)	Report of Progress Toward Gc	pal Attainment
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Indicator #:  4 Indicator: Number of ACI calls per fiscal year  Baseline Measurement: 73,468  First-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: Contracted Provider Reporting  New Data Source:  Description of Data:  Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:  New Description of Data:  New Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target:  Achieved  Not Achieved (if not achieved.explain why)	Reason why target was not achieved, and ch	hanges proposed to meet target:
Indicator: Number of ACI calls per fiscal year  Baseline Measurement: 73,468  First-year target/outcome measurement: 75,000  Second-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: 75,000  New Second-year target/outcome measurement: (if needed): Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:(if needed)  Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target: Achieved Not Achieved (if not achieved,explain why)	How first year target was achieved (optional	0:
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Number of ACI calls per fiscal year  8aseline Measurement: 73,468  First-year target/outcome measurement: 75,000  Second-year target/outcome measurement: 75,000  New Second-year target/outcome measurement (if needed):  Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:(if needed)  Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target: Achieved (if not achieved,explain why)		
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Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis.  New Description of Data:(if needed)  Data issues/caveats that affect outcome measures:  none.  New Data issues/caveats that affect outcome measures:  Report of Progress Toward Goal Attainment  First Year Target:  Achieved  Not Achieved (if not achieved,explain why)	Second-year target/outcome measurement:  New Second-year target/outcome measurer  Data Source:  Contracted Provider Reporting	75,000
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Report of Progress Toward Goal Attainment  First Year Target:  Not Achieved (if not achieved,explain why)	Second-year target/outcome measurement:  New Second-year target/outcome measurer Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported  New Description of Data:(if needed)	ment(if needed):  d by the contracted agencies on a quarterly basis.
First Year Target:  Achieved  Not Achieved (if not achieved,explain why)	Second-year target/outcome measurement:  New Second-year target/outcome measurer Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported  New Description of Data:(if needed)  Data issues/caveats that affect outcome measurer	ment(if needed):  d by the contracted agencies on a quarterly basis.
First Year Target:  Achieved  Not Achieved (if not achieved,explain why)	Data Source:  Contracted Provider Reporting  New Data Source(if needed):  Description of Data:  Number of ACI calls is tracked and reported  New Description of Data:(if needed)  Data issues/caveats that affect outcome meaning.	ment(if needed):  d by the contracted agencies on a quarterly basis.  asures:
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**Priority Area:** Department of Corrections Community Supervised Offenders

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**Priority Type:** SAT, MHS

**Population(s):** SMI, Other (Criminal/Juvenile Justice)

### Goal of the priority area:

Improve access to clinically appropriate services

- 1) Monitor and target technical assistance to Probation and Parole Officers and treatment providers on the prioritization process for offenders needing substance use disorder treatment in order to facilitate rapid assessment and treatment initiation.
- 2) Maintain Memorandum of Understandings (MOU) with the Department of Corrections for coordination of behavioral health treatment services.
- 3) Continue the CMHT Community Mental Health Treatment and OSMI Offenders with Serious Mental Illness programs.
- 4) Continue to participate on the DOC Oversight Committee.
- 5) Coordinate with DOC to administrate the JRITP with a focus on reducing the risk of harm due to substance use and mental health conditions, reducing recidivism, improving opportunities for employment or education, and improving the availability of stable housing.

Indicator #:	1
Indicator:	Current MOUs between DMH and DOC
Baseline Measurement:	Yes
First-year target/outcome measurement:	Yes
Second-year target/outcome measurement:	Yes
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
DMH Contracts Unit	
New Data Source(if needed):	
Description of Data:	
MOUs are maintained by the DMH Contracts	s Unit.
New Description of Data:(if needed)	
New Description of Data:(if needed)  Data issues/caveats that affect outcome mea	sures:
Data issues/caveats that affect outcome mea	
None	e measures:
Data issues/caveats that affect outcome mea  None  New Data issues/caveats that affect outcome	e measures: al Attainment
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Data issues/caveats that affect outcome mea  None  New Data issues/caveats that affect outcome  Report of Progress Toward Go.  First Year Target:  Achiev  Reason why target was not achieved, and characteristics.	e measures:  al Attainment  red
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Data issues/caveats that affect outcome mean None  New Data issues/caveats that affect outcome Report of Progress Toward Go. First Year Target:  Reason why target was not achieved, and charter than the progress Toward Go. First Year Target:  Reason why target was not achieved, and charter than the progress Toward Go. First Year Target:	e measures:  al Attainment  red
Data issues/caveats that affect outcome mea  None  New Data issues/caveats that affect outcome  Report of Progress Toward Go  First Year Target:  Reason why target was not achieved, and characteristics and characteristics are the compact of the c	e measures:  al Attainment  red
Data issues/caveats that affect outcome mea  None  New Data issues/caveats that affect outcome  Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and characteristic part of the progress achieved (optional)  MOU between DMH and DOC is current.  Indicator #:	e measures:  al Attainment  red

Data Source:	
The Division of Behavioral Health's Criminal	Justice Services Manager is the organizer of the meetings.
New Data Source(if needed):	
Description of Data:	
Oversight meetings are scheduled by the Div	vision of Behavioral Health (DBH) Criminal Justice Services Manager.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	CILPOC.
None	эш сэ.
New Data issues/caveats that affect outcome	moscuros.
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Report of Progress Toward Go	al Attainment
First Year Target:	Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional)	:
The number of Oversight Committee meeting	
Indicator #:	3
Indicator:	Number of consumers served in Justice Reinvestement Initiative Treatment Pilot
Baseline Measurement:	N/A
First-year target/outcome measurement:	325
Second-year target/outcome measurement:	375
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
DMH Information System	
New Data Source(if needed):	
Description of Data:	
The number of consumers served in the Justi	ce Reinvestment Initiative Treatment Pilot is tracked in the DMH Information System.
New Description of Data:(if needed)	
,	
Data issues/caveats that affect outcome meas	sures:
None	
Now Data insure/consists that offer at automorphism	measures:
New Data issues/caveats that affect outcome	
New Data issues/caveats that affect outcome	
Report of Progress Toward Goa	_

**Priority Area:** Tobacco Prevention / Cessation

**Priority Type:** SAP, SAT, MHS

Population(s): SMI, SED, PP, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder)

### Goal of the priority area:

Reduce tobacco initiation and promote tobacco cessation among vulnerable populations

- 1) Support provider training in tobacco cessation with proven effectiveness.
- 2) Promote the inclusion of tobacco cessation in the consumer's behavioral health treatment plan.
- 3) Support tobacco cessation in Missouri's college campuses.
- 4) Ensure the provision of tobacco enforcement and merchant education:
- a. Continue contracting with the Food and Drug Administration for the enforcement of federal tobacco control laws
- b. Maintain a Memorandum of Agreement with the Division of Alcohol and Tobacco Control for state and federal enforcement of tobacco control laws

Indicator #:	1
Indicator:	Annual Synar noncompliance rate is less than 20 percent
Baseline Measurement:	Yes
First-year target/outcome measurement:	Yes
Second-year target/outcome measurement:	Yes
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
Annual Synar Report	
New Data Source(if needed):	
Description of Data:	
-	nar Survey. For FY 2020, the Annual Synar Survey will be completed by October 1, 2020. For appleted by October 1, 2021.
Synar rate is determined from the Annual Sy	
Synar rate is determined from the Annual Sy FY 2021, the Annual Synar Survey will be com	npleted by October 1, 2021.
FY 2021, the Annual Synar Survey will be con  New Description of Data:(if needed)	npleted by October 1, 2021.
Synar rate is determined from the Annual Sy FY 2021, the Annual Synar Survey will be con  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea	sures:
Synar rate is determined from the Annual Sy FY 2021, the Annual Synar Survey will be com  New Description of Data:(if needed)  Data issues/caveats that affect outcome mea	sures:  e measures:
Synar rate is determined from the Annual Sy FY 2021, the Annual Synar Survey will be com  New Description of Data: (if needed)  Data issues/caveats that affect outcome mean None  New Data issues/caveats that affect outcome	sures:  e measures:  al Attainment
Synar rate is determined from the Annual Sy FY 2021, the Annual Synar Survey will be com  New Description of Data: (if needed)  Data issues/caveats that affect outcome mea  None  New Data issues/caveats that affect outcome  Report of Progress Toward God	sures:  e measures:  al Attainment  ved

Indicator #:	2
Indicator:	Number of tobacco retailers visited and provided with retailer education materials per fiscal year
Baseline Measurement:	5,272
First-year target/outcome measurement:	at least 5,000
Second-year target/outcome measurement:	at least 5,000
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
DMH Database	
New Data Source(if needed):	
Description of Data:	
Number of tobacco retailers visited and proving DMH staff and reported in the State's Ani	rided educational materials is documented by prevention agencies, entered into a database nual Synar Report.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome meas	Sures:
None	
New Data issues/caveats that affect outcome	measures:
New Data issues/caveats that affect outcome  Report of Progress Toward God	
,	al Attainment
Report of Progress Toward Go	al Attainment  ed Not Achieved (if not achieved, explain why)
Report of Progress Toward God First Year Target: Achiev Reason why target was not achieved, and cha	al Attainment  ed
Report of Progress Toward Goa First Year Target:  Reason why target was not achieved, and cha	al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:
Report of Progress Toward Goa First Year Target:  Reason why target was not achieved, and cha	al Attainment  ed
Report of Progress Toward Goo First Year Target: Achiev Reason why target was not achieved, and cha How first year target was achieved (optional): The number of tobacco retailers visited and p	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  corovided with retailer education materials in FY 2020 is 5,456.
Report of Progress Toward Goa First Year Target:  Reason why target was not achieved, and character was achieved (optional): The number of tobacco retailers visited and publicator #:	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  provided with retailer education materials in FY 2020 is 5,456.
Report of Progress Toward Good First Year Target: Achiev  Reason why target was not achieved, and characteristic transfer of tobacco retailers visited and publicator #:  Indicator:	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  corovided with retailer education materials in FY 2020 is 5,456.
Report of Progress Toward Goa First Year Target: Achiev  Reason why target was not achieved, and cha How first year target was achieved (optional): The number of tobacco retailers visited and p  Indicator #: Indicator: Baseline Measurement:	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  provided with retailer education materials in FY 2020 is 5,456.   Number of Tobacco Treatment Specialists per fiscal year
Report of Progress Toward Good First Year Target:  Reason why target was not achieved, and characterist year target was achieved (optional): The number of tobacco retailers visited and publicator #: Indicator: Baseline Measurement: First-year target/outcome measurement:	Al Attainment ed Not Achieved (if not achieved,explain why) anges proposed to meet target:  brovided with retailer education materials in FY 2020 is 5,456.  3  Number of Tobacco Treatment Specialists per fiscal year 29
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Report of Progress Toward Goa  First Year Target: Achiev  Reason why target was not achieved, and cha  How first year target was achieved (optional):  The number of tobacco retailers visited and p  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:	Al Attainment ed Not Achieved (if not achieved,explain why) anges proposed to meet target:  provided with retailer education materials in FY 2020 is 5,456.  3  Number of Tobacco Treatment Specialists per fiscal year 29  at least 25  at least 25
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Report of Progress Toward Good First Year Target:  Reason why target was not achieved, and characteristics and proceed to the progress of the	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  provided with retailer education materials in FY 2020 is 5,456.  3  Number of Tobacco Treatment Specialists per fiscal year 29  at least 25  at least 25  at least 25  ent(if needed):
Report of Progress Toward Goa First Year Target: Achiev  Reason why target was not achieved, and char How first year target was achieved (optional): The number of tobacco retailers visited and publicator #: Indicator: Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement: New Second-year target/outcome measurement: Data Source:  Division of Behavioral Health Prevention United	Al Attainment  ed Not Achieved (if not achieved,explain why)  anges proposed to meet target:  provided with retailer education materials in FY 2020 is 5,456.  3  Number of Tobacco Treatment Specialists per fiscal year 29  at least 25  at least 25  at least 25  ent(if needed):
Report of Progress Toward Goa  First Year Target: Achiev  Reason why target was not achieved, and cha  How first year target was achieved (optional):  The number of tobacco retailers visited and p  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Division of Behavioral Health Prevention Uni  New Data Source(if needed):	Al Attainment  ed Not Achieved (if not achieved,explain why)  Inges proposed to meet target:  Drovided with retailer education materials in FY 2020 is 5,456.  3 Number of Tobacco Treatment Specialists per fiscal year 29 at least 25 at least 25 ent(if needed):

None			
New Data issues/caveats t	that affect outcome measures:		
Report of Progres	s Toward Goal Attainm	ent	
First Year Target:	Achieved	Not Achieved (if not achieved,explain wh	y)
Reason why target was no	ot achieved, and changes proposed	to meet target:	
No Tobacco Treatment S	pecialists were training in FY 2020	ue to budget constraints as a result of the COVID-19 pa	indemic.
How first year target was	achieved (optional):		

**Priority Area:** Recovery Support Services

**Priority Type:** SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Rural, Criminal/Juvenile Justice, Homeless, Underserved Racial and Ethnic

Minorities)

### Goal of the priority area:

Provide support services to promote sustained recovery from behavioral health disorders

### Strategies to attain the goal:

- 1) Continue to grow the number of Certified Peer Specialists working in Missouri's behavioral health treatment and recovery system of care.
- 2) Continue the four Drop-In Centers and five Peer Support Phone Lines for persons with mental Illness
- 3) Promote the use of IPS Support Employment
- 4) Promote the use of Family Support
- 5) Promote the use of Recovery Support Services
- 6) Maintain a housing unit to administer the Shelter Plus Care grants to provide housing assistance to the Chronically homeless

# Annual Performance Indicators to measure goal success-Indicator #: Indicator: **Number of Certified Peer Specialists Baseline Measurement:** 800 First-year target/outcome measurement: 850 Second-year target/outcome measurement: 900 New Second-year target/outcome measurement(if needed): **Data Source: DBH Recovery Services Unit** New Data Source(if needed): **Description of Data:** The number of Certified Peer Specialists is tracked by DBH Recovery Services Unit. New Description of Data: (if needed) Data issues/caveats that affect outcome measures: None

Report of Progress Toward Goa	al Attainment
First Year Target:	
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional):	
The number of Certified Peer Specialists in FY	
<u>'</u>	·
Indicator #:	2
Indicator:	Number of contracts for Consumer Operated Service Programs (e.g. Drop-In Centers and
	Peer Support Warm Lines) for persons with mental illness per fiscal year
Baseline Measurement:	9
First-year target/outcome measurement:	9
Second-year target/outcome measurement:	9
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
DMH Contracts Unit	
New Data Source(if needed):	
Description of Data:	
Contracts are maintained by the DMH Contra	acts Unit.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome meas	curoc.
None	out 65.
None	
New Data issues/caveats that affect outcome	measures:
Danage of Duagues Taylord Car	al Attainmant
Report of Progress Toward Goa	_
Thist real ranget.	
Reason why target was not achieved, and cha	anges proposed to meet target:
How first year target was achieved (optional)	:
The number of Consumer Operated Service F	Programs for persons with mental illness in FY 2020 is 9.
	_
Indicator #:	3
Indicator:	Number of IPS SE programs per fiscal year
Baseline Measurement:	20
First-year target/outcome measurement:	20
	20
Second-year target/outcome measurement:	
Second-year target/outcome measurement:  New Second-year target/outcome measurem  Data Source:	

lew Data Source(if needed):	
escription of Data:	
The number of IPS Supported Employment i	s tracked by DMH Staff.
lew Description of Data:(if needed)	
ata issues/caveats that affect outcome mea	nsures:
None	
lew Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	al Attainment
irst Year Target:	ved Not Achieved (if not achieved,explain why)
eason why target was not achieved, and ch	anges proposed to meet target:
ow first year target was achieved (optional,	):
The number of Supported Employment prog	
ndicator #:	4
ndicator:	Number of families receiving family support per fiscal year
aseline Measurement:	1,001
irst-year target/outcome measurement:	at least 900
econd-year target/outcome measurement:	at least 900
lew Second-year target/outcome measuren	nent(if needed):
ata Source:	
Children's Services Unit.	
lew Data Source(if needed):	
escription of Data:	
The number of Family Support trainings is to	racked by the Children's Services Unit.
lew Description of Data:(if needed)	
ata issues/caveats that affect outcome mea	isures:
None	
lew Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	al Attainment
irst Year Target: Achie	ved Not Achieved (if not achieved,explain why)
eason why target was not achieved, and ch	anges proposed to meet target:
low first year target was achieved (optional)	<b>}•</b>

Indicator #:

Indicator:		Number of Recovery Support Providers	
Baseline Mea	surement:	53	
First-year targ	get/outcome measurement:	50	
Second-year	target/outcome measurement:	50	
New Second-	year target/outcome measurem	nent(if needed):	
Data Source:			
DMH Contra	cts Unit		
New Data Sou	urce(if needed):		
Description o	f Data:		
Contracts ar	e mainlined by the DMH Contra	cts Unit.	
New Descript	ion of Data:(if needed)		
Data issues/c	aveats that affect outcome mea	sures:	
None			
New Data issu	ues/caveats that affect outcome	e measures:	
Report of	f Progress Toward Go	al Attainment	
First Year Ta	arget: Achiev	ved Not Achieved (if not achieved,explain why)	
Reason why t	arget was not achieved, and ch	anges proposed to meet target:	
How first yea	r target was achieved (optional)		
	of Recovery Support providers in		
riority #:	6		
iority Area:	Medication Assisted Treatmen	t for Addiction	
iority Type:	SAT		
opulation(s):		al/Juvenile Justice, Underserved Racial and Ethnic Minorities)	
oal of the priority a			
o further integrate	medication therapy into the sub	stance use disorder treatment service delivery system.	
rategies to attain th	ne goal:		
		le technical assistance as needed. in MAT at a given treatment provider.	
—Annual Perforr	mance Indicators to measu	re goal success	
Indicator #:		1	
Indicator:		Number of consumers receiving medication therapy per fiscal year	
Baseline Mea	surement:	6,488	
First-year targ	get/outcome measurement:	at least 6,000	
Second-year	target/outcome measurement:	at least 6,000	
New Second-	year target/outcome measurem	nent(if needed):	
Data Source:	· ·		

New Data Source(if neede	ed):	
Description of Data:		
	Antabuse and acamprosate (and a	ment including use of methadone, Vivitrol, naltrexone, buprenorphine- any future FDA-approved MAT medication) is determined from billings
New Description of Data:(	'if needed)	
Data issues/caveats that a	ffect outcome measures:	
none		
New Data issues/caveats t	that affect outcome measures:	
	s Toward Goal Attainm	nent
Report of Progres	Achieved	Not Achieved (if not achieved,explain why)
	Achieved	
First Year Target:	ot achieved, and changes propose	ed to meet target:
First Year Target:	ot achieved, and changes propose	ed to meet target:

**Priority Area:** Community Advocacy and Education

**Priority Type:** SAP

**Population(s):** PP, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder, Underserved Racial

and Ethnic Minorities)

### Goal of the priority area:

Create positive community norms; policy change; promote mental wellness; and reduce alcohol, tobacco and other drug availability in Missouri's communities.

### Strategies to attain the goal:

- 1) Build state and community capacity for fostering strong partnerships and identifying new opportunities for collaboration.
- 2) Further data capacity in support of data-driven strategic planning to include the continuation of the Missouri Student Survey and the Behavioral Health web tool.
- 3) Fund evidence-based programming to prevent substance use and bulling among high-risk youth.
- 4) Continue the education initiative in Eastern Missouri to address heroin and other opiate drug use.

## -Annual Performance Indicators to measure goal success-

Indicator #:

**Indicator:** Number of schools educated in Signs of Suicide

**Baseline Measurement:** N/A

First-year target/outcome measurement: at least 80

Second-year target/outcome measurement: at least 80

New Second-year target/outcome measurement(if needed):

**Data Source:** 

**DBH Contracted Providers** 

lew Data Source(if needed):	
Description of Data:	
The number of schools educated in Signs of	Suicide is tracked and reported by contracted providers.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
None	
New Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	al Attainment
First Year Target:	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:
How first year target was achieved (optional)	<u> </u>
The number of schools educated in Signs of	
Indicator #:	2
Indicator:	Number of high-risk youth served in prevention programs per fiscal year
Baseline Measurement:	3,133
First-year target/outcome measurement:	at least 3,000
Second-year target/outcome measurement:	at least 3,000
New Second-year target/outcome measurem	nent(if needed):
Data Source:	
DBH Contracted Providers.	
New Data Source(if needed):	
Description of Data:	
Number of high-risk youth served in preven	tion programs is tracked and reported by contracted providers.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
None	
New Data issues/caveats that affect outcome	e measures:
and issues, careats that affect suttonic	
Report of Progress Toward Go	al Attainment
First Year Target:	ved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	anges proposed to meet target:
	vention programs in FY 2020 was 2,960. Due to the COVID-19 pandemic, prevention
The number of high-risk youth served in pre programs were transitioned to virtual forma	

Indicator #	<b>:</b>	3
Indicator:		Number of persons trained in MHFA per fiscal year
Baseline M	leasurement:	7,200
First-year t	arget/outcome measurement:	at least 6,500
Second-ye	ar target/outcome measurement:	at least 6,500
New Secon	nd-year target/outcome measuren	nent( <i>if needed</i> ):
Data Source	e:	
DBH Prev	ention Unit.	
New Data	Source(if needed):	
Description	n of Data:	
The numb	per trained in MHFA is tracked by [	DBH prevention staff.
New Descr	iption of Data:(if needed)	
New Descr	iption of bata.(4) necuca)	
Data issues	s/caveats that affect outcome mea	asures:
None		
New Data	issues/caveats that affect outcome	e measures:
First Year	of Progress Toward Go  Target: Achie  Achie  At target was not achieved, and ch	ved Not Achieved (if not achieved,explain why)
_	rear target was achieved (optional,	
The numb	per of persons trained in Mental He	ealth First Aid in FY 2020 is 0,000
ority #:	8	
ority Area:	School-Based Prevention Edc	uation
rity Type:	SAP	
ulation(s):		and/or MH, Children/Youth at Risk for BH Disorder)
I of the priority		· · · · · · · · · · · · · · · · · · ·
		ve overall school performance, and reduce incidents of violence.
tegies to attair	·	
		risk factors for substance use and violence.
	mic and social-emotional learning	

- 4) Reinforce prevention skills over time with repeated interventions.
- 5) Ensure programming is culturally competent and age appropriate.
- 6) Conduct annual fidelity reviews.

-Annual Performan	ce indicators	to measure	goai success-

Indicator #:

Number of students participating in SPIRIT per fiscal year Indicator:

9,354 **Baseline Measurement:** 

New Second-year target/outcome measurer	ment(if needed):
New Second-year target/outcome measurer Data Source:	nent(i) needed):
Missouri Institute for Mental Health (MIMH	)
New Data Source(if needed):	
,	
Description of Data:	
SPIRIT participation is tracked and reported	by the program evaluator MIMH.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	asures:
None	
New Data issues/caveats that affect outcom	e measures:
Report of Progress Toward Go	pal Attainment
First Year Target:	eved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and ch	nanges proposed to meet target:
How first year target was achieved (optional	D:
The number of students participating in SPI	RIT in FY 2020 is 9,834.
Indicator #:	2
Indicator:	Annual report generated
Baseline Measurement:	Yes
First-year target/outcome measurement:	Yes
Second-year target/outcome measurement:	
New Second-year target/outcome measurer Data Source:	ment( <i>if needed)</i> :
Adiana and Institute for Manual Health (Adian)	)
Missouri Institute for Mental Health (MIMH	
New Data Source(if needed):  Description of Data:	
New Data Source(if needed):	s posted to the DMH public website.
New Data Source(if needed):  Description of Data:  MIMH generates the annual report which is	s posted to the DMH public website.
New Data Source(if needed):  Description of Data:	
New Data Source(if needed):  Description of Data:  MIMH generates the annual report which is  New Description of Data:(if needed)	

	Reason why t	
	How first yea	target was achieved (optional):
	Annual SPIR	T Report was generated and posted to the DMH website.
rity	#:	9
-	Area:	Prescription Drug Overdose Deaths
-	Туре:	SAP
•	tion(s):	PWWDC, PWID, Other (Rural, Criminal/Juvenile Justice, Underserved Racial and Ethnic Minorities)
	the priority a	
		ed deaths and connect individuals experiencing overdose events to SUD treatment
tegi	ies to attain th	e goal:
		per of first responders, medical professionals, and other eligible groups trained to carry and administer naloxone.  Vareness of opioid risks and best practices for assisting during an overdose event.
Anı	nual Perfori	nance Indicators to measure goal success
	Indicator #:	1
	Indicator:	Number of individuals trained to carry and administer naloxone per fiscal year
	Baseline Mea	surement: 6,564
	First-year targ	pet/outcome measurement: 4,000
	Second-year	arget/outcome measurement: 4,000
	New Second-	year target/outcome measurement(if needed):
	Data Source:	
	Missouri Ins	itute for Mental Health (MIMH)
	New Data So	rrce(if needed):
	Description o	Data:
	The number	of individuals trained to carry and administer naloxone is tracked and reported by MIMH.
	New Descript	ion of Data:(if needed)
	Data issues/c	eveats that affect outcome measures:
	None	The state of the s
		nes/caveats that affect outcome measures:
		Progress Toward Goal Attainment
	Report of	
	Report of First Year Ta	rget: Not Achieved (if not achieved,explain why)

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Baseline Measure	_	
	ment:	17,880
First-year target/o	outcome measurement:	at least 8,000
Second-year targe	et/outcome measurement:	at least 8,000
New Second-year	target/outcome measurem	ent(if needed):
Data Source:		
Missouri Institute	e for Mental Health (MIMH)	
New Data Source	(if needed):	
Description of Date	ta:	
The number of n	aloxone doses distributed is	s tracked and reported by MIMH.
New Description of	of Data:(if needed)	
Data issues/cavea	ts that affect outcome meas	sures:
None.		
New Data issues/o	caveats that affect outcome	measures:
Report of Pr	ogress Toward Go	al Attainment
First Year Targe	t: Achiev	ed Not Achieved (if not achieved,explain why)
Reason why targe	t was not achieved, and cha	numer municipal to most tourst.
iteason why targe		anges proposed to meet target:
How first year tare The number of d Opioid Response	get was achieved (optional): oses of naloxone distribute	tin FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG
How first year tare The number of d Opioid Response	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for th	tin FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for th	: d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10	get was achieved (optional): oses of naloxone distributes (SOR) Grant and the Misso on funds were utilized for the	: d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evi	get was achieved (optional): oses of naloxone distributes (SOR) Grant and the Misso on funds were utilized for the	: d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evi  ty Type: Mi	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the	: d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evi  ty Type: MH  lation(s): SM  of the priority area:	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the	: d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evi  ty Type: MH  lation(s): SM  of the priority area:	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the dence-based Mental Health HS II, SED	to d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evinty Type: Millation(s): SM of the priority area: tinue evidence-based egies to attain the go ontinue to support E	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the dence-based Mental Health HS II, SED d practice to the same stand	d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG nis effort.  Practices  dards and fidelity as shown to be effective in research.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evinty Type: Mile Idation(s): SN  of the priority area: tinue evidence-based egies to attain the go continue to support E	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misson funds were utilized for the same stand dence-based Mental Health HS II, SED d practice to the same stand hal: BP programs.	d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG his effort.  Practices  dards and fidelity as shown to be effective in research.
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evinty Type: Mile Idation(s): SN  of the priority area: tinue evidence-based egies to attain the go continue to support E	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the defence-based Mental Health HS III, SED d practice to the same stand the programs. nitoring of fidelity in EBP programs.	d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG his effort.  Practices  dards and fidelity as shown to be effective in research.
How first year tary The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evi  ty Type: MH  lation(s): SM  of the priority area: tinue evidence-based egies to attain the go continue to support E- rovide on-going more  annual Performan	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the defence-based Mental Health HS III, SED d practice to the same stand the programs. nitoring of fidelity in EBP programs.	d in FY 2020 is 60,924. Funding for naloxone kits and distribution was provided by the State uri Opioid-Heroin Overdose Prevention and Education (MO-HOPE) project. No SABG his effort.  Practices  dards and fidelity as shown to be effective in research.
How first year tary The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evinty Type: MH  lation(s): SM  of the priority area: tinue evidence-based egies to attain the go continue to support E rovide on-going more  unnual Performan  Indicator #:	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the defence-based Mental Health HS fill, SED dipractice to the same stand the programs. one intoring of fidelity in EBP proceed the same actions of the sam	this provided by the State and Department of the State and
How first year tare The number of d Opioid Response Primary Prevention  ty #: 10  ty Area: Evinty Type: Mile Ilation(s): Siven of the priority area: tinue evidence-based egies to attain the good on tinue to support Evovide on-going more Indicator #: Indicator: Baseline Measure	get was achieved (optional): oses of naloxone distributed (SOR) Grant and the Misso on funds were utilized for the defence-based Mental Health HS fill, SED dipractice to the same stand the programs. one intoring of fidelity in EBP proceed the same actions of the sam	this provided by the State and distribution was provided by the State and Operation Overdose Prevention and Education (MO-HOPE) project. No SABG and seffort.  Practices  dards and fidelity as shown to be effective in research.  programs.  re goal success  1  Number of adults served in ITCD per fiscal year

New Second-year target/outcome measurement(if needed):

DMH information system	
New Data Source(if needed):	
Description of Data:	
Number of ITCD consumers is determined f	rom paid encounters for ITCD services.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome me	asures:
None	
New Data issues/caveats that affect outcom	ne measures:
Report of Progress Toward Go	pal Attainment
First Year Target:	eved Not Achieved (if not achieved,explain why)
Reason why target was not achieved, and cl	hanges proposed to meet target:
How first year target was achieved (optional	<b>(</b> ):
The number of adults served in ITCD in FY 2	
ndicator #:	2
ndicator:	Number of adults served in ACT per fiscal year
Baseline Measurement:	692
First-year target/outcome measurement:	at least 650
Second-year target/outcome measurement:	
New Second-year target/outcome measurei Data Source:	ment(if needed):
DMH Information System	
New Data Source(if needed):	
vew Data Source(if needed).	
Description of Data:	
Number of ACT consumers is determined fr	om paid encounters for ACT services.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome me	asures:
None	
New Data issues/caveats that affect outcom	ne measures:
Report of Progress Toward Go	pal Attainment
First Year Target:	_
_	hanges proposed to meet target:
eport of Progress Toward Gorst Year Target:  Achie Ach	Not Achieved (if not achieved,explain why)  hanges proposed to meet target:
The number adults served in ACT in FY 2020	

**Priority Area:** Persons who inject drugs intravenously

Priority Type: SAT

Population(s): PWID

### Goal of the priority area:

Ensure the provision of services to person who inject drugs in accordance with Substance Abuse Prevention and Treatment Block Grant statutory requirements

- 1) Monitor contractual requirements pertaining to PWID
- 2) Generate reports to monitor length of time to initiate treatment and percent engagement in treatment
- 3) Increase one-on-one discussions with key provider staff about data reports and target technical assistance as needed.

Indicator #:	1
Indicator:	Number of persons who inject drugs served in substance use disorder treatment per fiscal year (assuming the same level of funding)
Baseline Measurement:	11,634
First-year target/outcome measurement:	at least 10,000
Second-year target/outcome measurement:	at least 10,000
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
DMH information system.	
New Data Source(if needed):	
•	whom a paid claim on a substance use disorder treatment program was submitted to and
Persons who inject drugs are individuals for paid by DMH. Injection drug use is determin administration for the substance as IV inject	whom a paid claim on a substance use disorder treatment program was submitted to and ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.
Persons who inject drugs are individuals for paid by DMH. Injection drug use is determin administration for the substance as IV inject  New Description of Data: (if needed)	ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.
Persons who inject drugs are individuals for paid by DMH. Injection drug use is determin administration for the substance as IV inject  New Description of Data: (if needed)	ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.
paid by DMH. Injection drug use is determin administration for the substance as IV inject  New Description of Data:(if needed)  Data issues/caveats that affect outcome means	ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.  sures:
Persons who inject drugs are individuals for paid by DMH. Injection drug use is determin administration for the substance as IV inject  New Description of Data:(if needed)  Data issues/caveats that affect outcome means	ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.  sures:  al Attainment  Not Achieved (if not achieved,explain why)
Persons who inject drugs are individuals for paid by DMH. Injection drug use is determin administration for the substance as IV inject  New Description of Data:(if needed)  Data issues/caveats that affect outcome means None  New Data issues/caveats that affect outcome  Report of Progress Toward Goof	ed from the TEDS data also captured in the DMH Information system as the route of ion or non-IV injection on the primary, secondary or tertiary substances.  sures:  I measures:  Al Attainment  The Not Achieved (if not achieved, explain why)  Tanges proposed to meet target:

Baseline Measurement:	7.29
First-year target/outcome measurement:	Less than 7
Second-year target/outcome measurement:	Less than 7
New Second-year target/outcome measurem	ent(if needed):
Data Source:	
DMH Information System	
New Data Source(if needed):	
Description of Data:	
The average number of calendar days betwee reported injection method at admission per	een the Initial Contact date and the date of the first paid encounter for consumers who fiscal year.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
None	
New Data issues/caveats that affect outcome	measures:
Report of Progress Toward Goo First Year Target: Achiev  Reason why target was not achieved, and cha	Not Achieved (if not achieved,explain why)  anges proposed to meet target:
First Year Target:  Reason why target was not achieved, and characteristics  How first year target was achieved (optional)	Not Achieved (if not achieved,explain why)  anges proposed to meet target:
First Year Target:  Reason why target was not achieved, and characteristics  How first year target was achieved (optional)  The average number of days from Initial Con	ned
First Year Target:  Reason why target was not achieved, and characteristics with the Achieved (and characteristics). Achieved (and characteristics) and characteristics with the Achieved (and characteristics) and characteristics with the Achieved (and characteristics). Achieved (and characteristics) and characteristics with the Achieved (and characteristics) and ch	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : : : : : : : : : : : : : : : : : :
First Year Target:  Reason why target was not achieved, and characteristics  How first year target was achieved (optional)  The average number of days from Initial Constitution  Indicator #:  Indicator:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : tact to the first service for the PWID population in FY 2020 is 4.91 days.
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Con  Indicator #:  Indicator:  Baseline Measurement:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  tact to the first service for the PWID population in FY 2020 is 4.91 days.   Percent of persons who inject drugs who have engaged in treatment per fiscal year
First Year Target: Achiev  Reason why target was not achieved, and cha	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3  Percent of persons who inject drugs who have engaged in treatment per fiscal year 85%  at least 80%
First Year Target:  Reason why target was not achieved, and characteristics and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Con  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Con  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Constitution.  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:  DMH Information System	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Con  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional).  The average number of days from Initial Confidence in the average number of days from Initial Confidence.  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:  DMH Information System  New Data Source(if needed):	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Con  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  New Second-year target/outcome measurement:  New Second-year target/outcome measurement:  DMH Information System  New Data Source(if needed):  Description of Data:	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ttact to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85% at least 80% at least 80%
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Constitution.  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  New Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:  DMH Information System  New Data Source(if needed):  Description of Data:  The percent of the persons who reported injections.	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : tract to the first service for the PWID population in FY 2020 is 4.91 days.  3 Percent of persons who inject drugs who have engaged in treatment per fiscal year 85%  at least 80% at least 80% event(if needed):
First Year Target:  Reason why target was not achieved, and characteristics.  How first year target was achieved (optional)  The average number of days from Initial Constitution.  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:  DMH Information System  New Data Source(if needed):  Description of Data:  The percent of the persons who reported in program per fiscal year.	Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  :  :  :  :  :  :  :  :  :  :  :

New Data issues/caveats that affect outcome measures:

First Year 7	Target: 🔽 Achi	eved	Not Achieved (if not achieved,explain why)
Reason why	target was not achieved, and c	hanges proposed to m	eet target:
How first ye	ear target was achieved (optiona	ıl):	
The percen	nt of the PWID population who h	ave engaged in treatm	ent in FY 2020 is 84%
rity #:	12		
rity Area:	Substance use treatment for	r Pregnant Women and	Women with Dependent Children
rity Type:	SAT		
ulation(s):	PWWDC		
of the priority	area:		
ntinue to provid	le services to pregnant women	and women with deper	ndent children
tegies to attain	the goal:		
Continue collect	tual compliance with regard to ing wait list and capacity manag rmance Indicators to meas	gement data for contrac	women to substance use disorder treatment. cted providers.
Indicator #:		1	
Indicator:			it women and women with dependent children served in substance use
		disorder treatment	per fiscal year (assuming the same level of funding)
Baseline Me	easurement:	6,433	per fiscal year (assuming the same level of funding)
	easurement:		per fiscal year (assuming the same level of funding)
First-year ta		6,433 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta	rget/outcome measurement:	6,433 at least 5,900 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta	rget/outcome measurement: r target/outcome measurement l-year target/outcome measure	6,433 at least 5,900 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta Second-year New Second Data Source	rget/outcome measurement: r target/outcome measurement l-year target/outcome measure	6,433 at least 5,900 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta Second-year New Second Data Source DMH Inform	rget/outcome measurement: r target/outcome measurement d-year target/outcome measure	6,433 at least 5,900 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta Second-year New Second Data Source DMH Inform	rrget/outcome measurement: r target/outcome measurement d-year target/outcome measure :: mation System ource(if needed):	6,433 at least 5,900 at least 5,900	per fiscal year (assuming the same level of funding)
First-year ta Second-year New Second Data Source DMH Inform New Data So Description The numbe individuals	r target/outcome measurement: r target/outcome measurement d-year target/outcome measure :: mation System ource(if needed): of Data: er of pregnant women and wom	6,433 at least 5,900 at least 5,900 ment(if needed):	per fiscal year (assuming the same level of funding)  dren served is captured in the DMH information system. These are  H. Pregnancy status and number of dependent children are captured
First-year ta Second-year New Second Data Source  DMH Inform New Data So  Description  The number individuals in the DMH	r target/outcome measurement: r target/outcome measurement d-year target/outcome measure :: mation System ource(if needed): of Data: er of pregnant women and women for which a paid claim was sub	6,433 at least 5,900 at least 5,900 ment(if needed):	dren served is captured in the DMH information system. These are
First-year ta Second-year New Second Data Source DMH Inform New Data So Description The numbe individuals in the DMH New Description	r target/outcome measurement d-year target/outcome measure mation System  ource(if needed):  of Data: er of pregnant women and women for which a paid claim was sub thinformation system.	6,433 at least 5,900 at least 5,900 ment(if needed):  en with dependent chil mitted and paid by DM	dren served is captured in the DMH information system. These are
First-year ta Second-year New Second Data Source DMH Inform New Data So Description The numbe individuals in the DMH New Description	r target/outcome measurement: r target/outcome measurement d-year target/outcome measure : mation System  ource(if needed):  of Data: er of pregnant women and wom if or which a paid claim was sub H information system.  ption of Data:(if needed)	6,433 at least 5,900 at least 5,900 ment(if needed):  en with dependent chil mitted and paid by DM	dren served is captured in the DMH information system. These are

Reason why target was not achieved, and changes proposed to meet target:

### How first year target was achieved (optional):

The number of pregnant women or women with dependent children served in substance use disorder treatment in FY 2020 is 6,497.

Priority #: 13

Priority Area: Mental Health Services for Transition-Aged Youth and Young Adults

Priority Type: MHS

Population(s): SMI, SED

### Goal of the priority area:

Promote collaboration, implementation of effective interventions and supports, and enhance skills of individuals who work with transition-aged youth, young adults and their families with behavioral health needs including those that may be at risk of a First Episode Psychosis.

- 1) Continue to participate in the Oversight Advisory Group which focuses on the needs of youth/young adults with behavioral health issues including being at risk of or experience First Episode Psychosis.
- 2) Provide education on the importance of advocacy, prevention, early identification/intervention, and evidence-based treatment.
- 3) Provide training on evidence-based and promising practices.
- 4) Expand Integrated Treatment for Co-Occurring Disorders (ITCD) services to meet the unique needs of the transition-aged youth/young adult population.
- 5) Promote ACT TAY programs statewide.

dicator #: 1		
Indicator:	Number of education sessions per fiscal year	
Baseline Measurement:	13	
First-year target/outcome measurement:	4	
Second-year target/outcome measurement:	4	
New Second-year target/outcome measurem	ent(if needed):	
Data Source:		
The DBH Children's Unit tracks education se	ssions.	
New Data Source(if needed):		
Description of Data:		
The number of education sessions are tracket	ed and reported by the DMH Children's Unit.	
New Description of Data:(if needed)		
Data issues/caveats that affect outcome meas	sures:	
None		
New Data issues/caveats that affect outcome	measures:	
Report of Progress Toward Go	al Attainment	
First Year Target: Achiev	ed Not Achieved (if not achieved,explain why)	
	anges proposed to meet target:	

Indicator #:	2		
Indicator:	Number of Evidence-Based Practice related provide trainings per fiscal year		
Baseline Measurement:	line Measurement: 6		
st-year target/outcome measurement: 4			
Second-year target/outcome measurement:	4		
New Second-year target/outcome measurem	eent(if needed):		
Data Source:			
The DBH Children's Unit tracks EBP related t	rainings.		
New Data Source(if needed):			
Description of Data:			
The number of Evidence Based Practice- related reported by the DMH Children's Unit.	ated trainings for Mental Health transition-aged youth and young adults are tracked and		
New Description of Data:(if needed)			
Data issues/caveats that affect outcome mea	sures:		
none			
New Data issues/caveats that affect outcome			
Report of Progress Toward Go	al Attainment		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch	al Attainment  red  Not Achieved (if not achieved,explain why)  anges proposed to meet target:		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch	al Attainment  red  Not Achieved (if not achieved,explain why)  anges proposed to meet target:		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  : ted provider trainings in FY 2020 is 8.		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:	Al Attainment  Yed Not Achieved (if not achieved,explain why)  The anges proposed to meet target:  Seed provider trainings in FY 2020 is 8.   Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year		
Report of Progress Toward Go First Year Target: Achiev  Reason why target was not achieved, and che How first year target was achieved (optional) The number of Evidence-Based Practice relate  Indicator #: Indicator: Baseline Measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch How first year target was achieved (optional) The number of Evidence-Based Practice relat Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement:	Al Attainment  Yed Not Achieved (if not achieved,explain why)  The anges proposed to meet target:  Seed provider trainings in FY 2020 is 8.   Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and che  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and che  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and che  How first year target was achieved (optional)  The number of Evidence-Based Practice related  Indicator #:  Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  Data Source:  DMH information system.	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		
Report of Progress Toward Go  First Year Target: Achiev  Reason why target was not achieved, and ch  How first year target was achieved (optional)  The number of Evidence-Based Practice relat  Indicator #: Indicator:  Baseline Measurement:  First-year target/outcome measurement:  Second-year target/outcome measurement:  New Second-year target/outcome measurement:  DMH information system.  New Data Source(if needed):  Description of Data:	al Attainment  red Not Achieved (if not achieved,explain why)  anges proposed to meet target:  :  red provider trainings in FY 2020 is 8.   3  Number of Transition-Aged Youth/Young Adults served in ITCD per fiscal year  53  50  50		

Data issues/caveats that affect outcome mea	sures:
None.	
New Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go	al Attainment
First Year Target: Achiev	_
Reason why target was not achieved, and ch	anges proposed to meet target:
How first year target was achieved (optional)	le.
The number of Transition-Aged Youth or You	ung Adults served in ITCD in FY 2020 is 362.
1. P #	
Indicator #:	Number correct in ACT TAV programs per fiscal year
Indicator:  Baseline Measurement:	Number served in ACT TAY programs per fiscal year 529
First-year target/outcome measurement:	500
Second-year target/outcome measurement:	500
New Second-year target/outcome measurem  Data Source:	ient(i† needed):
DMH information system	
New Data Source(if needed):	
Description of Data:	
	ters in the Youth Assertive Community Treatment program.
New Description of Data:(if needed)	
Data issues/caveats that affect outcome mea	sures:
None.	
New Data issues/caveats that affect outcome	e measures:
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch	ved Not Achieved (if not achieved,explain why)
How first year target was achieved (optional)	
The number of Transition-Aged Youth or You	ang Addits Served in ACT in FY 2020 is 549.

**Priority Area:** Behavioral Healthcare services for Children

Priority Type: MHS
Population(s): SED

Goal of the priority area:

To enhance Children's Behavioral Health services by increasing the knowledge of effective services, supports and interventions, enhancing the skills of

service providers and expanding services based on the needs of the children, youth and families served.

- 1) Continue the statewide Adolescent CSTAR Committee focusing on the needs of youth/young adults with substance use issues. Committee will provide collaboration regarding issues of policy, training, treatment, funding, and outreach for adolescent substance use disorders.
- 2) Increase dissemination of research, best practices and success stories

	1		
<b>ndicator:</b> Number of meetings of the Adolescent CSTAR Committee per fiscal year.			
Baseline Measurement: 6			
First-year target/outcome measurement: at least 4			
Second-year target/outcome measurement:	at least 4		
New Second-year target/outcome measuren	nent(if needed):		
Data Source:			
DBH Children's Unit			
New Data Source(if needed):			
Description of Data:			
The number of meetings is tracked and repo	orted by the DBH Children's Unit.		
New Description of Data:(if needed)			
Data issues/caveats that affect outcome mea	asures:		
None.			
·			
Report of Progress Toward Go First Year Target:	val Attainment  ved   Not Achieved (if not achieved,explain why)		
Report of Progress Toward Go First Year Target: Achie  Reason why target was not achieved, and ch	val Attainment  ved   Not Achieved (if not achieved,explain why)  nanges proposed to meet target:		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch The number of meetings of the Adolescent COVID-19 pandemic.	ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and che The number of meetings of the Adolescent of COVID-19 pandemic.  How first year target was achieved (optional)	ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and che The number of meetings of the Adolescent of COVID-19 pandemic.  How first year target was achieved (optional)	ved Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  D:		
Report of Progress Toward Go First Year Target: Achiev  Reason why target was not achieved, and che The number of meetings of the Adolescent of COVID-19 pandemic.  How first year target was achieved (optional)  Indicator #: Indicator:	wed Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  1:  2  Number of posts of articles, research, and stories specific to behavioral healthcare for		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and che The number of meetings of the Adolescent COVID-19 pandemic.  How first year target was achieved (optional) Indicator #: Indicator:  Baseline Measurement:	Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  1:  2  Number of posts of articles, research, and stories specific to behavioral healthcare for chidlren per fiscal year		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and ch The number of meetings of the Adolescent of COVID-19 pandemic.  How first year target was achieved (optional) Indicator #: Indicator: Baseline Measurement: First-year target/outcome measurement:	Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  1:  2  Number of posts of articles, research, and stories specific to behavioral healthcare for chidlren per fiscal year  25  20		
Report of Progress Toward Go First Year Target: Achiev Reason why target was not achieved, and che The number of meetings of the Adolescent of COVID-19 pandemic.  How first year target was achieved (optional) Indicator #: Indicator:  Baseline Measurement: First-year target/outcome measurement: Second-year target/outcome measurement:	Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  2  Number of posts of articles, research, and stories specific to behavioral healthcare for chidlren per fiscal year  25  20  20		
Reason why target was not achieved, and ch	Not Achieved (if not achieved,explain why)  nanges proposed to meet target:  CSTAR Committee in FY 2020 is 3. The fourth meeting of this group was cancelled due to the  1:  2  Number of posts of articles, research, and stories specific to behavioral healthcare for chidlren per fiscal year  25  20  20		

The number of postings is trac	cked and reported by the D	BH Children's Unit.	
New Description of Data:(if nee	eded)		
Data issues/caveats that affect	outcome measures:		
None.			
New Data issues/caveats that a	ffect outcome measures:		
Report of Progress To	oward Goal Attainr	ment	
First Year Target:	Achieved	Not Achieved (if not achieved, explain why)	
Reason why target was not ach	ieved, and changes propos	ed to meet target:	
How first year target was achie	ved (optional):		
The number of posts of article	s, research, and stories spec	cific to behavioral healthcare for children in FY 2020 is 23.	
68 Approved: 04/19/2019 Expire	04/20/2022		

# **C. State Agency Expenditure Reports**

### MHBG Table 3 - Set-aside for Children's Mental Health Services

Reporting Period Start Date: 7/1/2019 Reporting Period End Date: 6/30/2020

Statewide Expenditures for Children's Mental Health Services				
Actual SFY 1994	Actual SFY 2019	Estimated/Actual SFY 2020	Expense Type	
\$14,716,201	\$34,699,311	\$43,993,889	• Actual C Estimated	
If <u>estimated</u> expenditures are provided, please indicate when <u>actual</u> expenditure data will be submitted to SAMHSA:  States and jurisdictions are required not to spend less than the amount expended in FY 1994.				
0930-0168 Approved: 04/19/2019 Expires: 04/30/2022				
Footnotes:				

# **C. State Agency Expenditure Reports**

### MHBG Table 6 - Maintenance of Effort for State Expenditures on Mental Health Services

Reporting Period Start Date: 07/01/2019 Reporting Period End Date: 06/30/2020

Period	Expenditures	<u>B1(2018) + B2(2019)</u> 2
(A)	(B)	(C)
SFY 2018 (1)	\$209,836,767	
SFY 2019 (2)	\$217,302,364	\$213,569,566
SFY 2020 (3)	\$246,570,637	

SFY 2020 (3)			\$246,570,637
Are the expenditure amounts	reported	d in Colu	umn B "actual" expenditures for the State fiscal years involved?
SFY 2018	Yes	X	No
SFY 2019	Yes	X	No
SFY 2020	Yes	X	No
If estimated expenditures are	provide	d, pleas	e indicate when actual expenditure data will be submitted to SAMHSA:
0930-0168 Approved: 04/19/2	019 Expir	res: 04/3	0/2022
Footnotes:			